



# LOKKEN & ASSOCIATES, P.C.

## Attorneys at Law

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### CONSENT TO RELEASE CONFIDENTIAL INFORMATION

I, \_\_\_\_\_, do hereby authorize \_\_\_\_\_, or any other responsible party, to disclose through written and oral communication, and testimony in court, any and all records/information pertaining to my treatment there, which may encompass alcohol, drug (including that protected under 42 U.S.C. § 290dd-2 (b) (2) (c), 42 C.F.R. § 2.64), and/or mental health care (individual, joint, family, or otherwise), to my attorney \_\_\_\_\_ of Laherty & Lokken, P.C., Boston Building, Suite 400, 9 East Exchange Place, Salt Lake City, Utah 84111 and his/her designees.

I am authorizing the release of all raw data, including, but not limited to referral forms, intake forms, questionnaires, questions, inventories, evaluation forms, notes, logs, memoranda, assessments, reports, interview transcripts, records, correspondence, and any other documents relating to this case, including all video or audio recordings and business records in your possession or under your care or control.

I further authorize the above-named party to speak freely with my attorney from Laherty & Lokken, P.C. or his/her paralegal concerning information they may deem important.

Laherty & Lokken, P.C. represents me in a juvenile court proceeding involving the custody of my children. This consent shall not expire until a final adjudication regarding my children is reached in Juvenile Court, and is given for the purpose of assisting my attorneys in preparing for trial.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 2002.

\_\_\_\_\_

SUBSCRIBED and SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 2002.

\_\_\_\_\_  
NOTARY PUBLIC

Residing in \_\_\_\_\_ County

Commission Expires: \_\_\_\_\_